SCC e		2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA TATE CORPORATION COMMISSION					
1.) CORPORA	ATION NAME:			DUE DATE: 9	9/30/2013		
Exelis Visua	l Information Solut			DOL D/ (12.)	(1 L. 3/30/2013		
2.) VA REGIST		ND OFFICE ADDRESS:		SCC ID NO: F1524315			
	OAD, SUITE 285			5.) STOCK INFORMATION CLASS AUTHORIZED			
	,			COMMON	1,000		
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY					1,500		
4.) STATE OR COUNTRY OF INCORPORATION: CO							
6.) PRINCIPAL	OFFICE ADDRESS:						
	ADDRESS: 4990 PE	ARL EAST CIR					
	CITY/ST/ZIP: BOULD	DER, CO 80301					
7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.							
			X OFF	TICER	DIRECTOR		
	NAME: TITLE:	JACQUELINE LAMPE					
	ADDRESS:	PRESIDENT 4990 PEARL EAST CIR					
	CITY/ST/ZIP/CO:	BOULDER, CO 80301					
			X OFF	TICER	DIRECTOR		
1	NAME:	ANDREA QUERCIA					
	TITLE:	VP/SECRETARY					
,	ADDRESS:	400 INITIATIVE DRIVE					
(CITY/ST/ZIP/CO:	PO BOX 60488 ROCHESTER, NY 14606-0488					
			X OFF	ICER	DIRECTOR		
-	NAME:	JAMES BROWN					
	TITLE: ADDRESS:	CONTRLLR/TREAS 4990 PEARL EAST CIRCLE					
	CITY/ST/ZIP/CO:	BOULDER, CO 80301					
		·	X OFF	TICER	DIRECTOR		
1	NAME:	PATRICIA FAULDS					
	TITLE:	ASST TREASURER					
,	ADDRESS:	400 INITIATIVE DRIVE					
(CITY/ST/ZIP/CO:	PO BOX 60488 ROCHESTER, NY 14606-0488					
,	NAME:	IANET MOODECCS	X OFF	FICER	DIRECTOR		
-	TITLE:	JANET MCGREGOR ASST TREASURER					
	ADDRESS:	1650 TYSONS BLVD, SUITE 1700					
(CITY/ST/ZIP/CO:	MCLEAN, VA 22102					
			X OFF	TICER	DIRECTOR		
	NAME:	MARIA TZORTZATOS					
	TITLE: ADDRESS:	ASST TREASURER					
	CITY/ST/ZIP/CO:	1650 TYSONS BLVD, SUITE 1700 MCLEAN, VA 22102					

			X OFFICER	DIRECTOR			
	NAME:	RACHEL SEMANCHIK					
	TITLE:	ASST SECRETARY					
	ADDRESS:	1650 TYSONS BLVD, SUITE 1700)				
	CITY/ST/ZIP/CO:	MCLEAN, VA 22102					
			OFFICER	DIDECTOR			
	NIANAT.	51011155 6001/5	OFFICER	X DIRECTOR			
	NAME:	RICHARD COOKE					
	TITLE:	CHAIRMAN					
	ADDRESS:	400 INITIATIVE DRIVE					
	CITY/ST/ZIP/CO:	PO BOX 60488					
	011 1/01/211 /00.	ROCHESTER, NY 14606-0488					
			OFFICER	χ DIRECTOR			
	NAME:	LAWRIE JORDAN					
	TITLE:	DIRECTOR					
	ADDRESS:	4990 PEARL EAST CIR					
	CITY/ST/ZIP/CO:	BOULDER, CO 80301					
			OFFICER	χ DIRECTOR			
	NAME:	Detricie FALLIDO	OFFICER	X BIRLETOR			
	TITLE:	Patricia FAULDS					
	ADDRESS:	DIRECTOR 400 INITIATIVE DRIVE					
	ADDRESS.						
	CITY/ST/ZIP/CO:	PO BOX 60488 ROCHESTER, NY 14606-0488					
	311 1/31/211 /33.	ROCIESTER, NT 14000-0408					
			OFFICER	χ DIRECTOR			
	NAME:	CHRISTOPHER YOUNG	<u> </u>	<u> </u>			
	TITLE:	DIRECTOR					
	ADDRESS:	400 INITIATIVE DRIVE					
		PO BOX 60488					
	CITY/ST/ZIP/CO:	ROCHESTER, NY 14606-0488					
			X OFFICER	DIRECTOR			
	NAME:	JO ANN DOSS					
	TITLE:	ASST TREASURER					
	ADDRESS:	1650 TYSONS BLVD, SUITE 1700	1				
	CITY/ST/ZIP/CO:	MCLEAN, VA 22102	,				
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND							
COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.							
/s/ MARIA TZ	ORTZATOS	MARIA TZORTZATOS, ASS	T 10	0/24/2013			
	OF DIRECTOR/OFFICER			DATE			
LISTED	IN THIS REPORT	PRINTED NAME AND CORPO	ORATE				
TITLE							
It is a Class 1 m	isdemeanor for any perso	n to sign a document, which include	es this electronic record, that	t is false in any material			
respect with the intent that the document be delivered to the Commission for filing.							